

# Amendment to Campaign Disclosure Statement

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JULIAN E. PEREZ  
ATTY GENCALIFORNIA  
1994 FORM 405

For Official Use Only

This form must be used to amend statements filed pursuant to Government Code Sections 84200-84216.5, and must be filed with all filing officers who received the statement being amended. NOTE: Do not use this form to amend a Statement of Organization, Form 410, Candidate Intention, Form 501, or a Campaign Bank Account, Form 502. Use the actual Form 410, 501 or 502, respectively, to make amendments.

The information required in Part I must correspond to the information provided on the campaign statement being amended.

## I Name of Filer (See important information on reverse.)

NAME OF FILER		I.D. NUMBER (IF APPLICABLE)
Stephen J. Mann		922038
MAILING ADDRESS OF FILER (NO. AND STREET)		
P.O. Box 648		
CITY	STATE	ZIP CODE
Lodi	CA	95241
AREA CODE/DAYTIME PHONE NUMBER		
(209) 368-6274		
NAME OF TREASURER IF RECIPIENT COMMITTEE		
Robert A. Rocha		
PERMANENT ADDRESS OF TREASURER: (IF APPLICABLE) (NO. AND STREET)		
1420 W. Kettleman Lane		
CITY	STATE	ZIP CODE
Lodi	CA	95242
AREA CODE/DAYTIME PHONE NUMBER		
(209) 333-8052		

## II Amendment Information

A. The following information amends campaign disclosure statement, Form No. 490.

executed on 1/2/95 for the period 7/1/95 through 12/31/95  
(MO, DAY, YR.) (MO, DAY, YR.) (MO, DAY, YR.)

B. The amended information affects items on the:

☐ Cover Page ☐ Allocation Page ☒ Summary Page  
☒ Schedule(s) E and B ☐ Part(s) 1

C. Describe the changes below. Include in detail all information you wish to become a part of your official campaign statement. Please attach a cover page, summary page and/or appropriate schedule(s) to this Form 405 if necessary for clarification. Include additional information on appropriately labeled continuation sheets. (Number of sheets attached 3.)

## III Verification (See important information on reverse.)

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 2/21/96 At Lodi, CA By Robert A. Rocha  
DATE CITY AND STATE SIGNATURE OF TREASURER OR FILER

Officeholder, candidate, state measure proponent, or sponsored committee responsible officer verification: I have used all reasonable diligence and to the best of my knowledge the treasurer has used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 2/20/96 At Lodi, CA By Stephen J. Mann  
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, PROPONENT, OR RESPONSIBLE OFFICER

Executed on \_\_\_\_\_ At \_\_\_\_\_ By \_\_\_\_\_  
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

Executed on \_\_\_\_\_ At \_\_\_\_\_ By \_\_\_\_\_  
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

FOR INFORMATION REQUIRED TO BE PROVIDED TO YOU PURSUANT TO THE INFORMATION PRACTICES ACT OF 1977, SEE INFORMATION MANUAL ON CAMPAIGN DISCLOSURE PROVISIONS OF THE POLITICAL REFORM ACT.

State of California Fair Political Practices Commission

# Campaign Disclosure Statement Summary Page

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>7/1/95</u> through <u>12/31/95</u>	CALIFORNIA 1994 FORM <b>490</b> Page <u>2</u> of <u>4</u> I.D. NUMBER <u>922038</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Stephen J. Mann

## Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B* TOTAL PREVIOUS PERIOD (SEE NOTE BELOW)	Column C TOTAL TO DATE (ADD COLUMNS A + B)
1. Monetary Contributions	Schedule A, Line 3	\$ <u>2,291</u>	\$ <u>0</u>	\$ <u>2,291</u>
2. Loans Received	Schedule B, Line 7	\$ <u>- 726</u>	\$ <u>726</u>	\$ <u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ <u>1,565</u>	\$ <u>726</u>	\$ <u>2,291</u>
4. Non-monetary Contributions	Schedule C, Line 3	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
5. SUBTOTAL CONTRIBUTIONS (Exclude Enforceable Promises)	Add Lines 3 + 4	\$ <u>1,565</u>	\$ <u>726</u>	\$ <u>2,291</u>
6. Enforceable Promises (Exclude Loan Guarantees, Line 18 below)	Schedule D, Line 7	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
7. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 5 + 6	\$ <u>1,565</u>	\$ <u>726</u>	\$ <u>2,291</u>

## Expenditures Made

8. Cash Payments (Other than Loans Made)	Schedule E, Line 5	\$ <u>180</u>	\$ <u>130</u>	\$ <u>310</u>
9. Loans Made	Schedule H, Line 7	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
10. SUBTOTAL CASH PAYMENTS	Add Lines 8 + 9	\$ <u>180</u>	\$ <u>130</u>	\$ <u>310</u>
11. Accrued Expenses (Unpaid Bills)	Schedule F, Line 5	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
12. TOTAL EXPENDITURES MADE	Add Lines 10 + 11	\$ <u>180</u>	\$ <u>130</u>	\$ <u>310</u>

## Current Cash Statement

13. Beginning Cash Balance	Previous Summary Page, Line 17	\$ <u>38</u>
14. Cash Receipts	Column A, Line 3 above	\$ <u>1,565</u>
15. Miscellaneous Increases to Cash	Schedule I, Line 4	\$ <u>10</u>
16. Cash Payments	Column A, Line 10 above	\$ <u>180</u>
17. ENDING CASH BALANCE	Add Lines 13 + 14 + 15, then subtract Line 16 If this is a termination statement, Line 17 must be zero.	\$ <u>1,433</u>

\* From previous Statement Summary Page, Column C. However, if this is the first report filed for the calendar year, Column B should be blank except for Loans Received (Line 2), Enforceable Promises (Line 6), Loans Made (Line 9), and Accrued Expenses (Line 11).

## Summary for Candidates in Both June and November Elections

	1/1 through 6/30	7/1 to Date
21. Contributions Received	\$ <u>0</u>	\$ <u>2,291</u>
22. Expenditures Made	\$ <u>130</u>	\$ <u>310</u>

## Cash Equivalents and Outstanding Debts

19. Cash Equivalents	See Instructions on reverse	\$ <u>0</u>
20. Outstanding Debts	Add Line 2 + Line 11 in Column C above	\$ <u>0</u>

# Schedule B — Part I Loans Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - Part I

SEE INSTRUCTIONS ON REVERSE

Statement covers period from <u>7/1/95</u> through <u>12/31/95</u>	CALIFORNIA 1995 FORM <b>490</b>
Page <u>3</u> of <u>4</u>	

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Stephen J. Mann

I.D. NUMBER

922038

DATE RECEIVED	LENDER OR GUARANTOR'S FULL NAME AND ADDRESS (IF COMMITTEE, ENTER FULL NAME, ADDRESS AND I.D. NUMBER. IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER THE TREASURER'S NAME AND ADDRESS)	LENDER / GUARANTOR'S OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER BUSINESS NAME)	LENDER INFORMATION			GUARANTOR INFORMATION	
			DUE DATE/ INTEREST RATE	AMOUNT OF LOAN	CUMULATIVE TO DATE	AMOUNT GUARANTEED	CUMULATIVE TO DATE
	<input type="checkbox"/> Lender <input type="checkbox"/> Guarantor*		DUE DATE		CALENDAR YEAR		CALENDAR YEAR
			INTEREST RATE		OTHER		OTHER
					\$		\$
	<input type="checkbox"/> Lender <input type="checkbox"/> Guarantor*		DUE DATE		CALENDAR YEAR		CALENDAR YEAR
			INTEREST RATE		OTHER		OTHER
					\$		\$
	<input type="checkbox"/> Lender <input type="checkbox"/> Guarantor*		DUE DATE		CALENDAR YEAR		CALENDAR YEAR
			INTEREST RATE		OTHER		OTHER
					\$		\$
			SUBTOTAL \$ (a)			\$ (b) Enter (b) on Summary Page, Line 18 only.	

\*See important instructions on reverse.

## Loans Received — Part I Summary

- Loans of \$100 or more received this period. (Include all Loans Received — Part I (a) subtotals.) ..... \$ 0
- Loans under \$100 received this period. (Do not itemize.) ..... \$ 0
- Total loans received this period. (Add Lines 1 and 2.) ..... TOTAL \$ 0

## Loans Received — Part II Summary

- Loans of \$100 or more repaid, forgiven, or paid by a third party this period. (Include all Part II (c) subtotals. If forgiven or paid by a third party, also itemize the transaction on Schedule A.) ..... \$ 726
- Loans under \$100 repaid, forgiven, or paid by a third party. (Do not itemize.) If forgiven or paid by a third party, include this amount on Schedule A Summary, Line 2. .... \$ 0
- Total loans repaid, forgiven, or paid by a third party this period. (Add Lines 4 + 5.) ..... TOTAL \$ ( 726 )
- Net change this period. (Subtract Line 6 from Line 3.) ..... NET \$ - 726  
Enter the net here and on the Summary Page, Column A, Line 2. ....  
May be a negative number.

# Schedule E Payments and Contributions (Other Than Loans) Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE E

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Stephen J. Mann

Statement covers period from <u>7/1/95</u> through <u>12/31/95</u>		<b>CALIFORNIA</b> <b>DISFORM</b> <b>490</b>
Page <u>4</u> of <u>4</u>		
I.D. NUMBER  922038		

## CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes accurately describes the expenditure, you may enter the code and leave the "Description of Payment" column blank. Refer to the back of Schedule E-Continuation Sheet for detailed explanations of each category.

- |  |  |  |
|--|--|--|
| "C" - MONETARY AND IN-KIND (NON-MONETARY) CONTRIBUTIONS TO OTHER CANDIDATES AND COMMITTEES | "B" - BROADCAST ADVERTISING                                    | "G" - GENERAL OPERATIONS AND OVERHEAD                      |
| "I" - INDEPENDENT EXPENDITURES   | "N" - NEWSPAPER AND PERIODICAL ADVERTISING                     | "T" - TRAVEL, ACCOMMODATIONS AND MEALS (MUST BE DESCRIBED) |
| "L" - LITERATURE   | "O" - OUTSIDE ADVERTISING                                      | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES      |
|  | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |  |
|  | "F" - FUNDRAISING EVENTS                                       |  |

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	IMPORTANT: DO NOT ITEMIZE THE PAYMENT OF ACCRUED EXPENSES ON SCHEDULE E. REPORT ONLY THE LUMP SUM OF SUCH PAYMENTS ON LINE 4 OF THE SUMMARY SECTION BELOW.		
	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Hutchins Street Square 125 S. Hutchins Street Lodi, CA 95240	F		175

*Important: Contributions and expenditures made out of campaign funds to or on behalf of other officeholders, candidates, committees, or ballot measures must also be entered on the Allocation Page, Part I.*

**SUBTOTAL \$ 175**

## Payments and Contributions Made Summary

- |   |                     |
|---|---------------------|
| 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)                                    | \$ 175              |
| 2. Payments made this period of under \$100. (Do not itemize.)  | \$ 15               |
| 3. Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part II, Column (d).)         | \$ 0                |
| 4. Total accrued expenses paid this period. (Do not itemize. Enter amount from Schedule F, Line 4.)                   | \$ 0                |
| 5. Total payments made this period. (Add Lines 1, 2, 3, and 4. Enter here and on the Summary Page, Column A, Line 8.) | <b>TOTAL \$ 180</b> |